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AMENDMENT AFTER FINAL
EXPEDITED PROCEDURE
ART UNIT 1644

PATENT
Attorney Docket No.: SCRIP1180-3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Griffin et al. Art Unit: 1644
Serial No.: 09/606,779 Examiner: D. Saunders
Filed: June 28, 2000
Title: METHOD FOR DIAGNOSIS OF THROMBOTIC DISORDERS

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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TRANSMITTAL LETTER

Sir:

Transmitted herewith for the above-identified application please find:

1. Response to the Final Office Action mailed July 3, 2003, including Exhibit "A" (15 pages);
2. Information Disclosure Statement (2 pages);
3. PTO Form 1449 (1 page);
4. One Reference;
5. Check No. 543683 in the amount of \$18.00;
6. Check No. 543686 in the amount of \$180.00; and
7. Return Postcard.

CERTIFICATION UNDER 37 CFR §1.8

I hereby certify that the documents referred to as enclosed herein are being deposited with the United States Postal Service as first class mail on September 3, 2003, in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Karen LePari

Karen LePari

In re Application of:
Griffin et al.
Serial No.: 09/606,779
Filed: June 28, 2000
Page 2

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Attorney Docket No.: SCRI1180-3

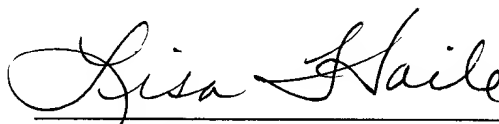
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The Fee for this Response is calculated as follows:

For	Claims Remaining After Amendment	Highest Number Previously Paid For	Extra Claims	Small Entity Rate	Large Entity Rate	Calculations
Total Claims	21	20	1	x \$09	x \$18	\$18.00
Independent Claims	2	3	0	x \$42	X \$84	\$.00
Multiple Claims				\$140	\$280	\$ 0.00
Basic Filing Fee				\$370	\$740	\$ 0.00
					TOTAL FEE	\$18.00

Enclosed is Check No. 543683 in the amount of \$18.00 for the one extra claim fee (large entity). Also enclosed is Check No. 543686 as fee to file the Information Disclosure Statement. The Commissioner is hereby authorized to charge any other fees associated with the filing submitted herewith, or credit any overpayments to Deposit Account No. 50-1355. A copy of this sheet is enclosed.

Respectfully submitted,



Lisa A. Haile, J.D., Ph.D.
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Date: September 3, 2003

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